MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO.

10595872

APPLICANT(S)

CLAIMS

| | AS FILED | | AFTER 1*AMENDMENT | | AFTER 2 MAMENDMENT | | CLAIIVIS | AS FILED | | AFTER 1 * AMENDMENT | | AFTER 2 ** AMENDMENT | |
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| TOTAL CLAIMS | | | 10 | 132 | | | TOTAL CLAIMS | | | | | | |
| PTO - 1360 | (REV. 11/04 | 1) | | | | | | | | MENT of CO ademark Offi | | | |